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CONFIRMATION NO. 7594



Bib Data Sheet

SERIAL NUMBER 09/902,225	FILING OR 371(c) DATE 07/10/2001 RULE	CLASS 607	GROUP ART UNIT 3762	ATTORNEY DOCKET NO.
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APPLICANTS

Michael Conor Minogue, Kinvara, IRELAND;
Michael Louis Crowe, Dublin, IRELAND;

** CONTINUING DATA *****
This application is a CON of PCT/IE00/00004 01/11/2000

** FOREIGN APPLICATIONS *****
IRELAND S990016 01/11/1999

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
** 08/27/2001

Foreign Priority claimed

☒ yes ☐ no

35 USC 119 (a-d) conditions
met

☒ yes ☐ no

Met after

Verified and
Acknowledged

Examiner's Signature
MB

Initials

STATE OR
COUNTRY
IRELAND

SHEETS
DRAWING
10

TOTAL
CLAIMS
21

INDEPENDENT
CLAIMS
1

ADDRESS
20999

TITLE

ELECTROTHERAPY DEVICE AND METHOD

FILING FEE
RECEIVED
429

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT
No. _____ for following:

☐ All Fees

☐ 1.16 Fees (Filing)

☐ 1.17 Fees (Processing Ext. of
time)

☐ 1.18 Fees (Issue)

☐ Other

☐ Credit



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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>McB</i> Examiner's Signature Initials		STATE OR COUNTRY IRELAND	SHEETS DRAWING 10	TOTAL CLAIMS 21
INDEPENDENT CLAIMS 1				
ADDRESS FROMMER LAWRENCE & HAUG LLP 745 Fifth Avenue New York ,NY 10151				
TITLE Electrotherapy device and method				
FILING FEE RECEIVED 429	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	